

Plan Review Request Form

Effective: July 16, 2002 Ref: Ordinance: 02-34 July 15, 2002

General Information

Date of Submittal _____ Amount Enclosed _____

Project Name _____

Company Name _____

Project Engineer _____

☐ Exempt Project (No Fees Assessed)

Check appropriate boxes and fill in amount due

I. Infrastructure Plan Review Fee

☐ Expedited Request

Date of Request _____

Approving Official - Name _____

Signature and Date _____

☐ Initial Submittal

Normal

Expedited

Amount Due

<input type="checkbox"/> 0 – 5.99 Acres	\$200	\$400	_____
<input type="checkbox"/> 6.0 – 15.99 Acres	\$250	\$500	_____
<input type="checkbox"/> 16.00 – 99.0 Acres	\$350	\$700	_____
<input type="checkbox"/> 100 Acres or Greater	\$500	\$1000	_____

☐ First Resubmittal

<input type="checkbox"/> 0 – 5.99 Acres	\$100	\$200	_____
<input type="checkbox"/> 6.0 – 15.99 Acres	\$125	\$250	_____
<input type="checkbox"/> 16.00 – 99.0 Acres	\$175	\$350	_____
<input type="checkbox"/> 100 Acres or Greater	\$250	\$500	_____

☐ Additional Resubmittals

<input type="checkbox"/> 0 – 5.99 Acres	\$ 50 each	\$100 each	_____
<input type="checkbox"/> 6.0 – 15.99 Acres	\$ 65 each	\$130 each	_____
<input type="checkbox"/> 16.00 – 99.0 Acres	\$ 85 each	\$170 each	_____
<input type="checkbox"/> 100 Acres or Greater	\$125 each	\$250 each	_____

Subtotal _____

II. Grading Plan Review Fee

Area being recontoured	Fee	Amount Due
<input type="checkbox"/> 0 – 2.99 Acres	\$25 each	_____
<input type="checkbox"/> 3.0 –14.99 Acres	\$50 each	_____
<input type="checkbox"/> 15 Acres or greater	\$100 each	_____
	Subtotal	_____

III. Commercial Development Plan Review Fee

Submittal	Fee	Amount Due
<input type="checkbox"/> Initial Submittal	\$100	_____
<input type="checkbox"/> First Resubmittal	\$ 50	_____
<input type="checkbox"/> Additional Submittals	\$ 25 each	_____
	Subtotal	_____

IV. Major Landscaping Plan Review Fee

Submittal	Fee	Amount Due
<input type="checkbox"/> Initial Submittal	\$200	_____
<input type="checkbox"/> First Resubmittal	\$100	_____
<input type="checkbox"/> Additional Submittals	\$ 50 each	_____
	Subtotal	_____

V. Variance Review Fee

	Fee	Amount Due
<input type="checkbox"/> Variance Review	\$50 each	_____
	Subtotal	_____

Total Amount Due _____

Method of Payment

- ☐ Cash
- ☐ Check Check # _____
- ☐ Credit Card ☐ MC ☐ Visa

Credit Card Account # _____ Expiration Date: _____

Received by: _____ Date: _____ Time: _____

Credit Account # 101-0000-320-2800